1407859

FORM D

JUL 0 9 2008 OF THOIVISON REUTERS

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimated average burden							
hours per resp	onse 16.00						

AFA (10F ATV)							
SEC USE ONLY							
Prefix		Serial					
		ļ					
		<u> </u>					
DA	TE RECEIVE	ED					
	1	1					

UNIFORM LIMITED OFFERING	G EXEMI	PTION L		
Name of Offering (check if this is an amendment and name has changed, and indicate of axonX LLC - \$1,500,000 Series A Member Interest/Warrant Offering	change.)			
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6)	ULOE		
A. BASIC IDENTIFICATION D)ATA			
Enter the information requested about the issuer				
Name of Issuer (check if this is an amendment and name has changed, and indicate char	nge.)	·		
axonX LLC				
Address of Executive Offices (Number and Street, City, State,	Zip Code)	Telephone Number (including Area Code)		
47 Loveton Circle, Suite F, Sparks, Maryland 21152		(410) 472-6590		
Address of Principal Business Operations (Number and Street, City. State (if different from Executive Offices)	Telephone Number (Including Area Code)			
Brief Description of Business				
The Company was formed to develop quality internet domain sites			Mall p.SEC	
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed		lease specify): d Liability Company	Mall processing Section JUL 022008	
Actual or Estimated Date of Incorporation or Organization: Month Year	tion for State:	mated	Weshington, Dr	
GENERAL INSTRUCTIONS			THE STATE OF THE S	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Re 77d(6).	egu		eq. or 15 U.S.C.	
When To File: A notice must be filed no later than 15 days after the first sale of securities in and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the add which it is due, on the date it was mailed by United States registered or certified mail to that	dre IIIIIII		: U.S. Securities after the date on	
Where To File: U.S. Securities and Exchange Commission. 450 Fifth Street. N.W. Washin	gt	08054370		
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which mus photocopies of the manually signed copy or bear typed or printed signatures.	ر t bu	normal rany copies not ma	nually signed must be	
Information Required: A new filing must contain all information requested. Amendments not thereto, the information requested in Part C, and any material changes from the information premot be filed with the SEC	eed only repor viously suppli	t the name of the issuer an ed in Parts A and B. Part E	d offering, any changes and the Appendix need	

Filing Fee: There is no federal filing fee.

State:

SEC 1972 (6-02)

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

BASIC IDENTIFICATION DATA Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years, • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Privalov, George Business or Residence Address (Number and Street, City, State, Zip Code) 47 Loveton Circle, Suite F, Sparks, Maryland 21152 Check Box(es) that Apply: **★** Promoter ★ Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Mottley, McCammon R. Business or Residence Address (Number and Street, City, State, Zip Code) 47 Loveton Circle, Suite F, Sparks, Maryland 21152 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Karczeski, David Business or Residence Address (Number and Street, City, State, Zip Code) 47 Loveton Circle, Suite F, Sparks, Maryland 21152 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Executive Officer Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: **Executive Officer** Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Beneficial Owner

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Executive Officer

Director

General and/or Managing Partner

				. В.	. INFORMA	ATION ABO	OUT OFFEI	RING				· ·
								Yes	No			
I . Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									🔲	X		
Answer also in Appendix, Column 2. if filing under ULOE.									40	050		
2. What is the minimum investment that will be accepted from any individual?								\$ <u>49</u>	,950			
3. Does the offering permit joint ownership of a single unit?									Yes 🔀	No □		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. It more than five (5) persons to be listed are associated persons of such a broker or dealer. you may set forth the information for that broker or dealer only.												
	Full Name (Last name first, if individual)											
NA	_ 11				a: a	~: <u>~ </u>						
	r Residenc	e Address	(Number a	nd Street.	City, State.	Zip Code)						
NA Name of A	esociated	Broker or	Dealer	_							-	
NA NA	1550014104	DIORCI VI	Dealer									
	Vhich Pers	on Listed	Has Solicit	ed or Inten	ds to Solic	it Purchase	ers					
(Chec	k "All Stat	es" or chec	k individua	al States)	***************************************							All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[[L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)											
Name of A	ssociated	Broker or	Dealer			 -					···-	
States in V	Vhich Pers	on Listed	Has Solicit	ed or Inter	ds to Solic	it Purchase	ers	<u> </u>		· ,		
(Chec	k "All Stat	es" or chec	k individus	l States)	***************************************						🗖 A	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last nam	e first. if in	dividual)				•					
Business	r Residenc	re Address	(Number a	and Street	City State	Zin Code	<u></u>		·			
Dusiness	7 Resident	o / tautess	(Ivamoer a	ina Bacci,	City, State,	, zip code,	,					
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT)	[NE]	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt \$ Common Preferred Convertible Securities (including warrants) \$_____ Partnership Interests \$______ Other (Specify LLC Interests and Warrants S 1,500,000 \$ 150,000 \$ 150,000 Answer also in Appendix, Column 3. if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is *'none" or "zero.' Aggregate Dollar Amount Number Investors of Purchases \$ 150,000 Accredited Investors. Non-accredited Investors, NA \$ NA \$ NA Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1. Type of **Dollar Amount** Type of Offering Security Sold Rule 505 S NA Regulation A NΑ § NA Rule 504NA § NA \$ NA a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs Legal Fees... **\$** 15,000 Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) State Filings \$ 1,000

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total

S 16,000

Ĺ	OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS								
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part CC proceeds to the issuer."	Question 4.	a. This differ	ence is the "	adjusted gros	s	<u>s</u> 1,484,000		
3.	each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	purpose in the payment.	s not known, ents listed mu	furnish an e st equal the a	estimate and				
						Payments to Officers. Directors, & Affiliates	Payments to Others		
	Salaries and fees			•••••		≥ \$ 200,000	[5		
	Purchase of real estate		• • • • • • • • • • • • • • • • • • • •			s	_ 🗆 \$		
	Purchase, rental or leasing and installation of mach and equipment	hinery		•••••		s	_ [] \$		
	Construction or leasing of plant buildings and faci	lities					_ 🗆 🖢 \$		
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or secur	ities of anoth	er		П,	□ •		
	Repayment of indebtedness								
	Working capital								
	Other (specify):								
						[] S	_ 🗆 \$		
	Column Totals				••••••	№ \$ 200,000	<u>\$ 1,284,000</u>		
	Total Payments Listed (column totals added)	• • • • • • • • • • • • • • • • • • • •			••••••	∑ \$ 1,484,000			
		D. FEI	DERAL SIGN	ATURE					
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accre	nish to the	U.S. Securitie	s and Excha	ange Commi	ssion, upon writte			
lssı	er (Print or Type)	Signatur	•	H-	-14	Date			
	onX LLC	Th	Ch	1/10	U	6/00/0	8		
Nar	ne of Signer (Print or Type)	Title of S	igner (Print o	r Type)	·	<u> </u>	-		
M	Cammon R. Mottley	CEO							

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C.1001.)

